

RADIOLOGICAL EMERGENCY RESPONSE TRAINING APPLICATION

Name (As you want it to appear on a certificate – Last, First, MI, Suffix)	
Mailing Address	Work Telephone () _____ E-mail Address _____
Organization Represented	Job Title
<p>★ Training sessions (please choose which applies):</p> <ul style="list-style-type: none"><input type="checkbox"/> Emergency Operations Center (EOC) Oct. 6th<input type="checkbox"/> Radiological Officer Dec. 13th a.m. session<input type="checkbox"/> Field Team Monitor Dec. 13th p.m. session<input type="checkbox"/> Communications Nov. 15th p.m. session<input type="checkbox"/> Public Information Officer/Rumor Control Nov. 15th a.m. session<input type="checkbox"/> Evacuation Assembly Center (EAC) Sept. 15th<input type="checkbox"/> General Session/Tabletop Jan. 10th & Jan. 11th	
If you have participated in a nuclear power plant exercise (VOPEX), please indicate your role/job function:	
Signature of Applicant	Date
<p>Applications for attendance transmitted by facsimile will be accepted for consideration if submitted prior to the application deadline. Attendees may choose to apply on-line by using the VDEM Web Page at www.vdem.state.va.us</p> <p>Consult the training announcement for details related to the training for which this application is being submitted. In case of questions, contact the VDEM Radiological Emergency Preparedness Branch at (804) 897-6500, ext. 6585 or 6591.</p>	
<p>Complete and return this application by the date shown on the training announcement. Return to:</p> <p style="text-align: center;">Virginia Department of Emergency Management ATTN: Amy Ettinger 10501 Trade Court Richmond, Virginia 23236 Facsimile: (804) 897-6526</p>	